PART B - FEE(S) TRANSMITTAL EXPRESS MAIL LABEL NO. Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISS FEE EV 956 466 019 US Commissioner for Patents 04-16-2 P.O. Box 1450 APR 1-3 2007 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INCUCTIONS of form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 01/16/2007 959 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. LAHIVE & COCKFIELD, LLP ONE POST OFFICE SQUARE BOSTON, MA 02109-2127 04/16/2007 SFELEKE2 00000035 120080 (Depositor's name) 10540618 (Signature) 01 FC:2501 700.00 DA 02 FC:1504 300.00 DA (Date 03 FC:8001 30.00 APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. FILING DATE 10/540,618 06/23/2005 Graham Reed FHW-142US 9016 TITLE OF INVENTION: OPTICAL COUPLER APPLN, TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 \$0 \$1000 04/16/2007 **EXAMINER** ART UNIT **CLASS-SUBCLASS** LEPISTO, RYAN A 2883 385-037000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Lahive & Cockfield, LLP (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) THE UNIVERSITY OF SURREY Guildford, Surrey, United Kingdom Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🛂 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-0080 (enclose an extra copy of this form). 🔼 Advance Order - # of Copies _ 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Date ____April 13, 2007___ Authorized Signature Anthony Registration No. 38,220 Typed or printed name ,Laurentano, Esq.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL FORM

Application Number 10/540,618-Conf. #9016

Filing Date June 23, 2005

First Named Inventor Graham REED

Art Unit 2883

Examiner Name R. A. Lepisto

Attorney Docket Number FUNA 142118

(to be used for all correspondence after initial filing) **FHW-142US** Total Number of Pages in This Submission ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information **Provisional Application** Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please **Extension of Time Request Terminal Disclaimer** Identify below): Issue Fee Transmittal Form PTOL-**Express Abandonment Request** Request for Refund 85 Part B Return Receipt Postcard Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name LAHIVE & COCKFIELD, LLP Signature Printed name Anthony A. Laurentano Reg. No. Date 38,220 April 13, 2007

Express Mail Label No.	EV 956 466 019US	Dated: April 13, 2007

PTO/SB/17 (02-07)
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r the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/540,618-Conf. #9016 **Application Number FEE TRANSMITTAL** June 23, 2005 Filing Date Graham REED First Named Inventor For FY 2007 **Examiner Name** R. A. Lepisto Applicant claims small entity status. See 37 CFR 1.27 2883 Art Unit FHW-142US TOTAL AMOUNT OF PAYMENT Attorney Docket No.

METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
X Deposit Account Depos	x Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP							
For the above-identi	fied deposit	account, the D	irector is he	ereby authorize	d to: (checl	k all that apply)		
x Charge fee(s)	indicated be	elow		Charge	e fee(s) indi	icated below, ex	cept for th	e filing fee
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH	-							•
	FILIN	NG FEES Small Entity	SEAR	CH FEES Small Entity	EXAMIN	ATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fees F</u>	Paid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	O	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (includi							50	25
Each independent claim over	er 3 (includ	ing Reissues)					200	100
Multiple dependent claims							360	180
Total Claims Extra (Fee (\$)	Fee Pai	d (\$)		Itiple Depende		• • • • • • • • • • • • • • • • • • • •
- 20 = x = Fee (\$) HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims Extra		Fee (\$)	Fee Pai	d (\$)				_
-3 =	x	=		_ (4)				
HP = highest number of independ	lent claims pa	id for, if greater tha	an 3.					
3. APPLICATION SIZE FEE								
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4. OTHER FEE(S)				•	•		Fees	Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 2501 Utility issue fee						00.00		
1504 Publication fee for early, voluntary, or normal 300.00 8001 Printed copy of patent w/o color 30.00								
		Joon Timed (~py or pa					
SUBMITTED BY	11							

SUBMITTED BY		1				
Signature	Sutterne	questary	Registration No. (Attorney/Agent)	38,220	Telephone	(617) 227-7400
Name (Print/Type)	Anthony A. Lauren	tano	· · ·		Date	April 13, 2007

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